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**4**

Number of Pages (including this page)

Date: 05/31/2005  
To: Commissioner for Patents  
Location: United States Patent and Trademark Office  
Fax No.: (703) 872-9306  
From: Hisashi D. Watanabe Registration No. 37,465  
Subject: Serial No. 09/773,863 Docket No. CS10686

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**MESSAGE:**

Enclosed herewith, please find:

- Request for Continued Examination Transmittal
- Preliminary Amendment
- Fee Transmittal Form
- Petition for Extension of Time

**PLEASE GIVE THESE PAPERS TO:**

|                 |                         |
|-----------------|-------------------------|
| EXAMINER:       | Selby, Gevell V.        |
| GROUP ART UNIT: | 2615                    |
| SERIAL NO.:     | 09/773,863              |
| FILED:          | 02/01/2001              |
| INVENTOR:       | Klapman, Matthew et al. |

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| <b>FEE TRANSMITTAL</b><br><small>Patent fees are subject to annual revision</small> |              |                            |       |  | <b>Complete if Known</b>  |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
|---|--------------|----------------------------|-------|--|---|--|-------------------------|--|--|--------------|--------------|-----|-----|-----|-----|-----------------|------|------|------|------|--|------|-----|------|----|-------------------------------------|------|----|------|----|-------------------------------------|------|-----|------|-----|---------------------------|------|------|------|------|---|------|------|------|------|--|------|-------|------|-------|---|------|-----|------|----|--|------|-----|------|-----|---|------|------|------|-----|--|------|------|------|-----|---|------|------|------|------|--|------|-----|------|-----|------------------|------|-----|------|-----|--|------|------|------|-----|--------------------------|------|------|------|------|---|------|-----|------|-----|----------------------------------|------|------|------|-----|------------------------------------|------|------|------|-----|--------------------------------|------|-----|------|-----|------------------|------|------|------|-----|-----------------|------|-----|------|-----|-------------------------------|------|----|------|----|---------------------------------------|------|-----|------|-----|-------------------|------|----|------|----|--|------|-----|------|-----|---|------|-----|------|-----|--|------|-----|------|-----|-----------------------------------|------|-----|------|-----|---|--|--|--|--|--|---------------|--|--|--|--|--|--|--|--|--|----------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---------------------|--|--|--|--|--|--|--|--|--|-------------------|--|---------------------|--|--|------------------|--|--------|--|--|-----------|--|----------------------------|--|--|------|--|----------|--|--|
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27      |              |                            |       |  | Application Number  |  | 09/773,863              |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
|   |              |                            |       |  | Filing Date   |  | 02/01/2001              |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
|   |              |                            |       |  | First Named Inventor  |  | Klapman, Matthew et al. |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
|   |              |                            |       |  | Examiner Name   |  | Selby, Gevell V.        |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
|   |              |                            |       |  | Group Art Unit  |  | 2615                    |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
|   |              |                            |       |  | Attorney Docket No.   |  | CS10686                 |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| <b>METHOD OF PAYMENT (check all that apply)</b>                                     |              |                            |       |  | <b>FEE CALCULATION (continued)</b>  |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| Check   | Credit card  | Money Order                | Other | None   | <b>4. ADDITIONAL FEES</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity</th> <th style="text-align: left;">Small Entity</th> </tr> <tr> <th>Fee</th> <th>Fee</th> <th>Fee</th> <th>Fee</th> <th>Fee Description</th> </tr> <tr> <th>Code</th> <th>(\$)</th> <th>Code</th> <th>(\$)</th> <th></th> </tr> </thead> <tbody> <tr> <td>1051</td> <td>130</td> <td>2051</td> <td>65</td> <td>SurchARGE - late filing fee or oath</td> </tr> <tr> <td>1052</td> <td>50</td> <td>2052</td> <td>25</td> <td>SurchARGE - late Provisional filing</td> </tr> <tr> <td>1053</td> <td>130</td> <td>2053</td> <td>130</td> <td>Non-English specification</td> </tr> <tr> <td>1812</td> <td>2520</td> <td>1812</td> <td>2520</td> <td>For filing a request for ex parte Reexamination</td> </tr> <tr> <td>1804</td> <td>920*</td> <td>1804</td> <td>920*</td> <td>Requesting publication of SIR prior to Examiner action</td> </tr> <tr> <td>1805</td> <td>1840*</td> <td>1805</td> <td>1840*</td> <td>Requesting publication of SIR after Examiner action</td> </tr> <tr> <td>1251</td> <td>120</td> <td>2251</td> <td>60</td> <td>Extension for reply within first month</td> </tr> <tr> <td>1252</td> <td>450</td> <td>2252</td> <td>225</td> <td>Extension for reply within second month</td> </tr> <tr> <td>1253</td> <td>1020</td> <td>2253</td> <td>510</td> <td>Extension for reply within third month</td> </tr> <tr> <td>1254</td> <td>1590</td> <td>2254</td> <td>795</td> <td>Extension for reply within fourth month</td> </tr> <tr> <td>1255</td> <td>2160</td> <td>2255</td> <td>1080</td> <td>Extension for reply within fifth month</td> </tr> <tr> <td>1401</td> <td>500</td> <td>2401</td> <td>250</td> <td>Notice of Appeal</td> </tr> <tr> <td>1402</td> <td>500</td> <td>2402</td> <td>250</td> <td>Filing a brief in support of an appeal</td> </tr> <tr> <td>1403</td> <td>1000</td> <td>2403</td> <td>500</td> <td>Request for oral hearing</td> </tr> <tr> <td>1451</td> <td>1510</td> <td>1451</td> <td>1510</td> <td>Petition to institute a public use proceeding</td> </tr> <tr> <td>1452</td> <td>500</td> <td>2452</td> <td>250</td> <td>Petition to revive - unavoidable</td> </tr> <tr> <td>1453</td> <td>1500</td> <td>2453</td> <td>750</td> <td>Petition to revive - unintentional</td> </tr> <tr> <td>1501</td> <td>1400</td> <td>2501</td> <td>700</td> <td>Utility issue fee (or reissue)</td> </tr> <tr> <td>1502</td> <td>800</td> <td>2502</td> <td>400</td> <td>Design issue fee</td> </tr> <tr> <td>1503</td> <td>1100</td> <td>2503</td> <td>550</td> <td>Plant issue fee</td> </tr> <tr> <td>1480</td> <td>130</td> <td>1460</td> <td>130</td> <td>Petitions to the Commissioner</td> </tr> <tr> <td>1807</td> <td>50</td> <td>1807</td> <td>50</td> <td>Processing fee under 37 CFR § 1.17(q)</td> </tr> <tr> <td>1806</td> <td>180</td> <td>1806</td> <td>180</td> <td>Submission of IDS</td> </tr> <tr> <td>8021</td> <td>40</td> <td>8021</td> <td>40</td> <td>Recording each patent assignment per property (times number of properties)</td> </tr> <tr> <td>1809</td> <td>790</td> <td>2809</td> <td>395</td> <td>Filing a submission after final rejection (37 CFR § 1.129(a))</td> </tr> <tr> <td>1810</td> <td>790</td> <td>2810</td> <td>395</td> <td>For each additional invention to be examined (37 CFR § 1.129(p))</td> </tr> <tr> <td>1801</td> <td>790</td> <td>2801</td> <td>395</td> <td>Request for Continued Examination</td> </tr> <tr> <td>1802</td> <td>900</td> <td>1802</td> <td>900</td> <td>Request for expedited examination of a design application</td> </tr> <tr> <td colspan="5"></td> <td colspan="5" style="text-align: right; padding: 5px;">Fee Paid (\$)</td> </tr> <tr> <td colspan="5"></td> <td colspan="5" style="text-align: right; padding: 5px;">\$790.00</td> </tr> <tr> <td colspan="5"></td> <td colspan="5" style="text-align: center; padding: 10px;"> <b>5. OTHER FEE(S) (specify)</b><br/> <small>Non-English Specification, \$130 fee (no small entity discount)</small> </td> </tr> <tr> <td colspan="5"></td> <td colspan="5" style="text-align: right; padding: 5px;"> <input type="checkbox"/> Fee Paid (\$)         </td> </tr> <tr> <td colspan="5" style="text-align: center; padding: 5px;"> <b>SUBMITTED BY</b> </td> <td colspan="5"></td> </tr> <tr> <td colspan="2">Name (Print/Type)</td> <td colspan="3">Hisashi D. Watanabe</td> <td colspan="2">Registration No.</td> <td colspan="3">37,465</td> </tr> <tr> <td colspan="2">Signature</td> <td colspan="3"><i>Hisashi D. Watanabe</i></td> <td colspan="2">Date</td> <td colspan="3">05/31/05</td> </tr> </tbody></table> |  |                         |  |  | Large Entity | Small Entity | Fee | Fee | Fee | Fee | Fee Description | Code | (\$) | Code | (\$) |  | 1051 | 130 | 2051 | 65 | SurchARGE - late filing fee or oath | 1052 | 50 | 2052 | 25 | SurchARGE - late Provisional filing | 1053 | 130 | 2053 | 130 | Non-English specification | 1812 | 2520 | 1812 | 2520 | For filing a request for ex parte Reexamination | 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action | 1805 | 1840* | 1805 | 1840* | Requesting publication of SIR after Examiner action | 1251 | 120 | 2251 | 60 | Extension for reply within first month | 1252 | 450 | 2252 | 225 | Extension for reply within second month | 1253 | 1020 | 2253 | 510 | Extension for reply within third month | 1254 | 1590 | 2254 | 795 | Extension for reply within fourth month | 1255 | 2160 | 2255 | 1080 | Extension for reply within fifth month | 1401 | 500 | 2401 | 250 | Notice of Appeal | 1402 | 500 | 2402 | 250 | Filing a brief in support of an appeal | 1403 | 1000 | 2403 | 500 | Request for oral hearing | 1451 | 1510 | 1451 | 1510 | Petition to institute a public use proceeding | 1452 | 500 | 2452 | 250 | Petition to revive - unavoidable | 1453 | 1500 | 2453 | 750 | Petition to revive - unintentional | 1501 | 1400 | 2501 | 700 | Utility issue fee (or reissue) | 1502 | 800 | 2502 | 400 | Design issue fee | 1503 | 1100 | 2503 | 550 | Plant issue fee | 1480 | 130 | 1460 | 130 | Petitions to the Commissioner | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR § 1.17(q) | 1806 | 180 | 1806 | 180 | Submission of IDS | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | 1809 | 790 | 2809 | 395 | Filing a submission after final rejection (37 CFR § 1.129(a)) | 1810 | 790 | 2810 | 395 | For each additional invention to be examined (37 CFR § 1.129(p)) | 1801 | 790 | 2801 | 395 | Request for Continued Examination | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  |  |  |  |  | Fee Paid (\$) |  |  |  |  |  |  |  |  |  | \$790.00 |  |  |  |  |  |  |  |  |  | <b>5. OTHER FEE(S) (specify)</b><br><small>Non-English Specification, \$130 fee (no small entity discount)</small> |  |  |  |  |  |  |  |  |  | <input type="checkbox"/> Fee Paid (\$) |  |  |  |  | <b>SUBMITTED BY</b> |  |  |  |  |  |  |  |  |  | Name (Print/Type) |  | Hisashi D. Watanabe |  |  | Registration No. |  | 37,465 |  |  | Signature |  | <i>Hisashi D. Watanabe</i> |  |  | Date |  | 05/31/05 |  |  |
| Large Entity  | Small Entity |                            |       |  |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| Fee   | Fee          | Fee                        | Fee   | Fee Description  |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| Code  | (\$)         | Code                       | (\$)  |  |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1051  | 130          | 2051                       | 65    | SurchARGE - late filing fee or oath  |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1052  | 50           | 2052                       | 25    | SurchARGE - late Provisional filing  |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1053  | 130          | 2053                       | 130   | Non-English specification  |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1812  | 2520         | 1812                       | 2520  | For filing a request for ex parte Reexamination                            |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1804  | 920*         | 1804                       | 920*  | Requesting publication of SIR prior to Examiner action                     |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1805  | 1840*        | 1805                       | 1840* | Requesting publication of SIR after Examiner action                        |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1251  | 120          | 2251                       | 60    | Extension for reply within first month                                     |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1252  | 450          | 2252                       | 225   | Extension for reply within second month                                    |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1253  | 1020         | 2253                       | 510   | Extension for reply within third month                                     |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1254  | 1590         | 2254                       | 795   | Extension for reply within fourth month                                    |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1255  | 2160         | 2255                       | 1080  | Extension for reply within fifth month                                     |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1401  | 500          | 2401                       | 250   | Notice of Appeal   |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1402  | 500          | 2402                       | 250   | Filing a brief in support of an appeal                                     |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1403  | 1000         | 2403                       | 500   | Request for oral hearing   |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1451  | 1510         | 1451                       | 1510  | Petition to institute a public use proceeding                              |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1452  | 500          | 2452                       | 250   | Petition to revive - unavoidable   |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1453  | 1500         | 2453                       | 750   | Petition to revive - unintentional   |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1501  | 1400         | 2501                       | 700   | Utility issue fee (or reissue)   |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1502  | 800          | 2502                       | 400   | Design issue fee   |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1503  | 1100         | 2503                       | 550   | Plant issue fee  |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1480  | 130          | 1460                       | 130   | Petitions to the Commissioner  |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1807  | 50           | 1807                       | 50    | Processing fee under 37 CFR § 1.17(q)                                      |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1806  | 180          | 1806                       | 180   | Submission of IDS  |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 8021  | 40           | 8021                       | 40    | Recording each patent assignment per property (times number of properties) |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1809  | 790          | 2809                       | 395   | Filing a submission after final rejection (37 CFR § 1.129(a))              |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1810  | 790          | 2810                       | 395   | For each additional invention to be examined (37 CFR § 1.129(p))           |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1801  | 790          | 2801                       | 395   | Request for Continued Examination  |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| 1802  | 900          | 1802                       | 900   | Request for expedited examination of a design application                  |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
|   |              |                            |       |  | Fee Paid (\$)   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
|   |              |                            |       |  | \$790.00  |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
|   |              |                            |       |  | <b>5. OTHER FEE(S) (specify)</b><br><small>Non-English Specification, \$130 fee (no small entity discount)</small>  |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
|   |              |                            |       |  | <input type="checkbox"/> Fee Paid (\$)  |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| <b>SUBMITTED BY</b>   |              |                            |       |  |   |  |                         |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| Name (Print/Type)   |              | Hisashi D. Watanabe        |       |  | Registration No.  |  | 37,465                  |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |
| Signature   |              | <i>Hisashi D. Watanabe</i> |       |  | Date  |  | 05/31/05                |  |  |              |              |     |     |     |     |                 |      |      |      |      |  |      |     |      |    |                                     |      |    |      |    |                                     |      |     |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |      |       |   |      |     |      |    |  |      |     |      |     |   |      |      |      |     |  |      |      |      |     |   |      |      |      |      |  |      |     |      |     |                  |      |     |      |     |  |      |      |      |     |                          |      |      |      |      |   |      |     |      |     |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |      |      |     |                 |      |     |      |     |                               |      |    |      |    |                                       |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |  |  |  |  |  |               |  |  |  |  |  |  |  |  |  |          |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |                   |  |                     |  |  |                  |  |        |  |  |           |  |                            |  |  |      |  |          |  |  |